



# STATE OF COLORADO REPORT OF PATERNITY DETERMINATION

This form can be filled out and printed at the following Web address: <https://www.colorado.gov/cdphe/paternity-forms-and-applications>. This document must contain the signature and seal of the District/Juvenile court and cannot be submitted online. You may fax form: 1-877-260-4080.

first		middle		last	
1. CHILD'S NEW NAME:					
<b>PARENTS: THE INFORMATION IN THIS BOX WILL APPEAR ON THE CHILD'S NEW BIRTH CERTIFICATE</b>					
first		middle		maiden name	
2. MOTHER'S MAIDEN NAME:					
			state		country if not U.S.A
2A. MOTHER'S BIRTH DATE			2B. MOTHER'S BIRTH PLACE:		
first		middle		last	
3. FATHER'S FULL NAME:					
			state		country if not U.S.A
3A. FATHER'S BIRTH DATE			3B. FATHER'S BIRTH PLACE:		
street or box #					
4. MOTHER'S CURRENT MAILING ADDRESS:					
city/town		state		zip	
				4A. MOTHER'S DAYTIME PHONE #:   —   —	
street or box #					
5. FATHER'S CURRENT MAILING ADDRESS:					
city/town		state		zip	
				5A. FATHER'S DAYTIME PHONE #:   —   —	
5B. Parents' Driver's License #:			State of License		Expiration Date
<b>ATTORNEY OR AGENCY</b> (To be contacted for additional information if needed)				Attorney ID #:	
6. CONTACT NAME:			6A. FIRM OR AGENCY:		
street or box #			city/town		state
6B. ADDRESS:			zip		
6C. CONTACT PHONE #:   —   —			6D. E-MAIL ADDRESS:		
<b>THIS INFORMATION IS NEEDED TO LOCATE AND SEAL THE ORIGINAL BIRTH CERTIFICATE</b>					
first		middle		last	
7. CHILD'S NAME AT BIRTH:				7A. SEX:	
			county		state
8B. BIRTHDATE:			8C. BIRTHPLACE:		
first		middle		maiden name	
8. MOTHER'S MAIDEN NAME:					
first		middle		last	
9. FATHER'S NAME:					
<b>CERTIFICATION OF CLERK OF COURT</b>					
<p>I hereby certify that the child identified above was decreed to be the child of the above named parents on the _____ day of _____,</p> <p>20____ and is now to bear the name of _____</p> <p>as set forth in the decree of Paternity in the District/Juvenile Court of _____ County, Colorado.</p> <p>Case number _____ Signature and seal of court _____ Date ____/____/____</p> <p>By _____ Deputy Clerk</p>					

**Return form to:**  
Vital Records/Paternity Determination  
Colorado Department of Public Health and Environment  
4300 Cherry Creek Drive South  
Denver, CO 80246-1530

**Contact information:**  
Vital Records Paternity Specialist  
Phone: 303-692-2230  
E-mail: vital.records@state.co.us  
Fax: 1-877-260-4080

## INSTRUCTIONS

- A. An electronic version of this form can be filled out and printed by going to the following Web address: <https://www.colorado.gov/cdphe/paternity-forms-and-applications>. You must then obtain the signature and seal of the District/Juvenile court and mail or fax the completed report to Vital Records.
- B. Colorado law (C.R.S. 25-2-107 and 25-2-113) authorizes the preparation of a new birth certificate for a person born in Colorado following a decree of paternity. To avoid unnecessary delay in filing the new birth certificate, please complete this form carefully.
- C. For children born outside of Colorado the report of paternity determination will be forwarded to the appropriate state vital statistics office.